Receipt date: 10/27/2009 Page 1 of 2

Substitute for form 1449/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

| Application Number | 10/524,809 |
|------------------------|--------------------|
| Filing Date | 02/15/2005 |
| Inventor(s) | James S. Im |
| Art Unit | 2895 |
| Examiner Name | Fernando L. Toledo |
| Attorney Docket Number | 070050.2721 |

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| Exam Initial | No. | Document No. | Publication Date | Applicant(s) |
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| Examiner Signature /Fernando L. Toledo/ Date Considered 11/05/2 | 09 |
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NY02:669972.1
* Examiner: Initial citation considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

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| Examiner Signature | /Fernando L. Toledo/ | Date Considered | 11/05/2009 | |
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